

ISSUE SLIP STAPLE AREA ((or additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-----------|-------------|---------|
| FEE DETERMINATION | <i>Sm</i> | 40 | 9/19/65 |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | | <i>Dull</i> | 8/22/60 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ ----- Rejected N ----- Non-elected
 □ ----- Allowed I ----- Interference
 - (Through numeral)... Canceled A ----- Appeal
 + ----- Restricted O ----- Objected

| Claim | Final | Original | Date |
|-------|-------|----------|---------|
| 1 | ✓ | ✓ | 9/19/65 |
| 2 | ✓ | ✓ | 9/19/65 |
| 3 | ✓ | ✓ | 9/19/65 |
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| 5 | ✓ | ✓ | 9/19/65 |
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| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

(LEFT INSIDE)